



DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DRYCLEANER ENVIRONMENTAL RESPONSE PROGRAM

4th Floor, L & C Annex, 401 Church Street
Nashville, Tennessee 37243

2006 Drycleaning Facilities Registration

1. **REGISTRATION TYPE:** Initial / Revised / Renewal (Circle one) Active Facility/Abandoned Facility (Circle one)

2. **FACILITY INFORMATION:** Registration #: D-____-

Facility Name _____ County: _____

Facility Address: _____ EPA ID _____

City/State/Zip: _____ Telephone (____) _____

Mailing Address (if different): _____

Manager/Operator (name): _____ Telephone: (____) _____

Manager/Operator Address: _____ Zip code: _____

Facility Owner (name): _____ Telephone: (____) _____

Facility Owner Address: _____ Zip code: _____

Property Owner (name): _____ Telephone: (____) _____

Property Owner Address: _____ Zip code: _____

Are you considered a franchisee or are you operating the facility (not the real property) under a lease or other agreement? (Yes/No) (Circle One) If yes, indicate the name, address and telephone number of the franchiser/lease holder:

Do you currently have a Certified Environmental Drycleaner (CED) on your staff? (Yes/No) (Circle One) If yes, submit a copy of the current CED certificate along with your registration form and fee.

3. **SITE INFORMATION:**

- (a) Is this an initial registration? (Yes/No) If yes, complete items 3(b) through 3(d) otherwise go to item 3(e).
- (b) Indicated the date drycleaning operations began or will begin at this location. _____
- (c) Did the facility previously operate at another location? (Yes/No) If yes, indicate location. _____
- (d) Does the facility have floor drains? (Yes/No) If yes, indicate the distance from machine/solvent areas. _____
- (e) In the past year, have there been any changes in the number or location of dry/pickup stores previously reported or was the answer to item 3(a) yes? (Yes/No) If yes, indicate dry/pickup store information in the space provided.

4. **SOLVENT PURCHASES:** Solvent Type: ____ Dense Solvents (perc), ____ Light Solvents (petroleum, DF2000, GreenEarth)

- (a) Did you timely submit each quarterly solvent report during the past year? (Yes/No) Do the solvent purchases identified in the quarterly reports represent all solvent that was obtained and on which the appropriate surcharge was paid? (Yes/No) If no, explain. _____
- (b) In the past year did you sell or transfer solvent to another drycleaning facility? (Yes/No) If yes, identify the date, facility and quantity of solvent sold or transferred. _____
- (c) If you reported no solvent purchases from July 1, 2004 – June 30, 2005, provide a detailed explanation of how the facility operated without additional solvent including your solvent inventory and your solvent storage capacity _____

5. MACHINE SPECIFIC INFORMATION:

Fill out the information requested below for each drycleaning machine at your facility. If you have only one drycleaning machine, fill out the information listed under Machine A. If your facility has two drycleaning machines, designate one machine as machine A and the other as machine B and fill out the information for each. If your facility has more than two drycleaning machines, make a copy of this page and designate additional drycleaning machines C, D, etc. and complete the information requested for each machine.

Machine A: Machine Make/Model: _____

(a) Age of machine: _____ Date put into operation at this location: _____ Type of Solvent used: _____

(b) Machine type [transfer, dry to dry vented, dry to dry non-vented, other (explain): _____

(c) How is the solvent obtained? _____ Closed loop/direct coupled. If other (explain): _____

(d) Indicate below how the wastes you generate are being disposed/handled by placing "✓" in the space provided for each method that applies. Indicate any additional wastes that are generated which may contain drycleaning solvent. If wastes are handled by a hazardous waste disposal company, indicate the name of the company in the space provided.

<u>Waste</u>	<u>Sanitary Sewer</u>	<u>Septic Tank</u>	<u>Dumpster</u>	<u>Hazardous Waste Disposal Firm</u>	<u>Other (Explain)</u>
Sludges	_____	_____	_____	_____	_____
Still bottoms	_____	_____	_____	_____	_____
Filters	_____	_____	_____	_____	_____
Lint	_____	_____	_____	_____	_____
Dust	_____	_____	_____	_____	_____
Separator Water	_____	_____	_____	_____	_____

(e) Is there containment under/around the machine? (Yes/No) (Circle One) If yes, indicate the capacity and the construction material of the containment. _____

Machine B: Machine Make/Model: _____

(a) Age of machine: _____ Date put into operation at this location: _____ Type of Solvent used: _____

(b) Machine type [transfer, dry to dry vented, dry to dry non-vented, other (explain): _____

(c) How is the solvent obtained? _____ Closed loop/direct coupled. If other (explain): _____

(d) Indicate below how the wastes you generate are being disposed/handled by placing "✓" in the space provided for each method that applies. Indicate any additional wastes that are generated which may contain drycleaning solvent. If wastes are handled by a hazardous waste disposal company, indicate the name of the company in the space provided.

<u>Waste</u>	<u>Sanitary Sewer</u>	<u>Septic Tank</u>	<u>Dumpster</u>	<u>Hazardous Waste Disposal Firm</u>	<u>Other (Explain)</u>
Sludges	_____	_____	_____	_____	_____
Still bottoms	_____	_____	_____	_____	_____
Filters	_____	_____	_____	_____	_____
Lint	_____	_____	_____	_____	_____
Dust	_____	_____	_____	_____	_____
Separator Water	_____	_____	_____	_____	_____

(e) Is there containment under/around the machine? (Yes/No) (Circle One) If yes, indicate the capacity and the construction material of the containment. _____

6. CERTIFICATION: I certify under penalty of law, including but not limited to penalties for perjury, that the information contained in this form and on any attachments is true, accurate and complete to the best of my knowledge, information and belief.

Signature of Owner/Manager or Authorized Representative

Title

Date